The CIP Execution Approach - Bringing RHSC Pillars into Focus

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#RHSUPPLIES2016



HP+ Overview

Health Policy Plus (HP+) is a five-year cooperative agreement funded by USAID. The project's HIV activities are supported by PEPFAR.

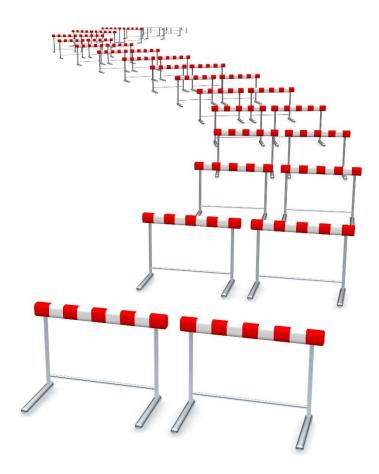
HP+ improves the enabling environment for equitable and sustainable health services, supplies, and delivery systems through policy development and implementation, with an emphasis on voluntary, rights-based health programs







Tracking CIP implementation

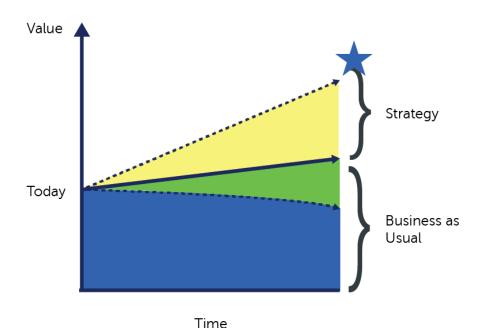


What are the main hurdles countries face?

CIP as a Strategy requires change

A good strategy is an *integrated set of choices* which position an organization to create sustainable value and to achieve desired outcomes over the long run

Achieving the Vision



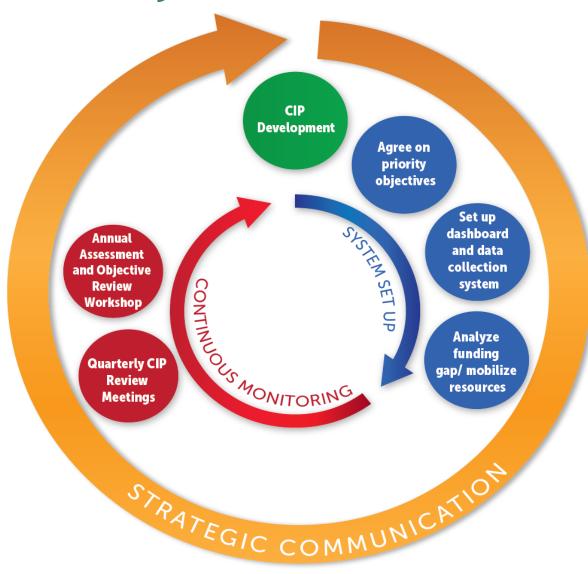
Palladium/HP+'s CIP Execution Approach

- Empower the government to prioritize and focus their attention on most critical objectives
- Provide tools and build capacity of FP program stakeholders
- Align all partners' activities and financing with the prioritized set of objectives
- Set processes to routinely assess program progress

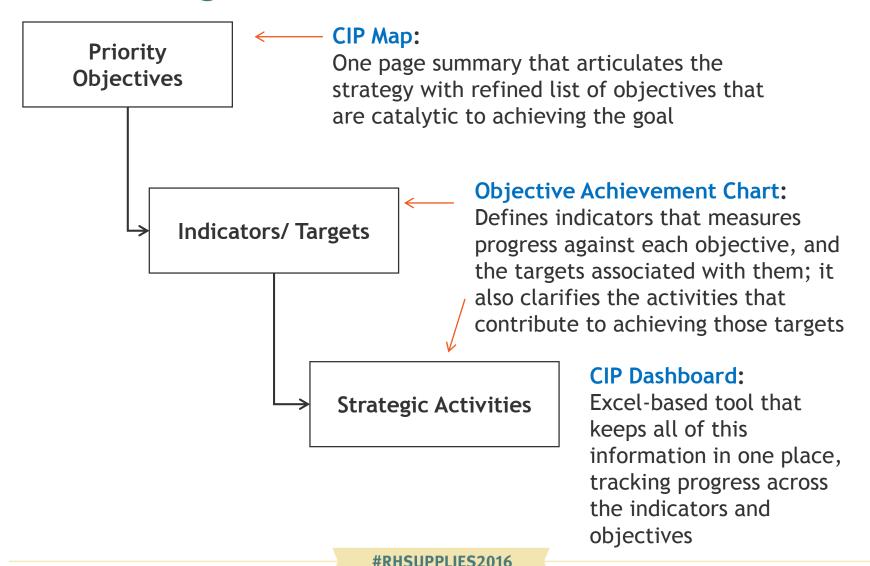
Successful strategy execution requires system management and people



CIP Execution Cycle



Executing the CIP



CIP Map Components and Their Descriptors

What is the overarching goal or vision for the strategy?

Who does the program seek to impact?

How will the program impact the targeted audiences?

What key players contribute to delivery of the program?

What are the major themes or categories in delivering impact?

What beneficiary-oriented program processes should be addressed to deliver impact?

What internal capacity and systems should be addressed to increase program impact?

How can we improve financing mechanism to secure adequate resources for program impact?

BENEFICIARY VALUES which drive

> ENABLING BODIES

> > Working with

BENEFICIARY-ORIENTED FP PROGRAM PROCESSES

> that deliver

SUPERVISION, MONITORING, AND MANAGEMENT

FINANCING

Sample CIP Map: Nigeria

Strategic Vision: Increase contraceptive prevalence rate from 15% in 2013 to 36% by 2018

BENEFICIARY Women of Reproductive Age Youth Men **VALUES** S1. WRA are more S5 Men are more S3. Youth are more S2. WRA have S4. Youth have \mathbf{A} knowledgeable about knowledgeable about knowledgeable about improved access to improved access to and act on informed and are accepting of which and act on informed affordable FP options affordable FP options drive fertility choice FP. fertility choice **ENABLING** State & Federal Government **Private Sector Providers Donors** Community/Traditional Leaders **BODIES DEMAND GENERATION** SERVICE DELIVERY SUPPLY CHAIN **POLICY & ENVIRONMENT** Increase the number of Strengthen forecasting, Increase the number of states working Increase the number of facilities Nigerians that are provided procurement, and logistics that are implementing with providing high quality youth-friendly with accurate information on relevant FP/RH policies and management capacity at all FP services contraceptive methods and guidelines, including FP CIPs levels where to access them DIRECT BENEFICIARY-Increase the number of Increase percentage of facilities Ensure contraceptives are Increase the number of policy **IMPACTING** (both public and private) which religious and opinion leaders available at all service makers and opinion leaders **PROCESSES** who support use of Family provide quality family planning delivery points, including who realize the importance of **Planning** services private sector, at all times Ensure that health facilities have that deliver adequate number and category of trained staff according to national guidelines to provide LARC services SUPERVISION. Increase the use of innovative mechanisms Build capacity at all levels for FP MONITORING & to improve data management at all levels programming and coordination COORDINATION of the healthcare delivery Mobilize new FP resources Increase funding for FP and Increase domestic resources for through innovative mechanisms FINANCING ensure timely release of funds FP, both at federal and state including private sector from federal and state budgets government levels

Performance Monitoring | CIP Review Meetings

Regular check-ins with everyone promotes accountability

Thematic Working Group Meeting

- Led by FMOH Thematic Area lead
- All stakeholders implementing relevant activities and FMOH activity owners
- Held monthly
- Review milestones achieved
- Identify and solve operational problems
- Respond to short-term problems and promote continuous improvements

Strategy Review Meetings

- Led by CIP Manager
- FMOH and key implementing partners
- Held quarterly
- Identify and analyze strategy implementation issues and make decisions to move the strategy forward
- Focus is on CIP Map and Dashboard
- Address issues preventing the objectives to be achieved, and/or the goal to be achieved

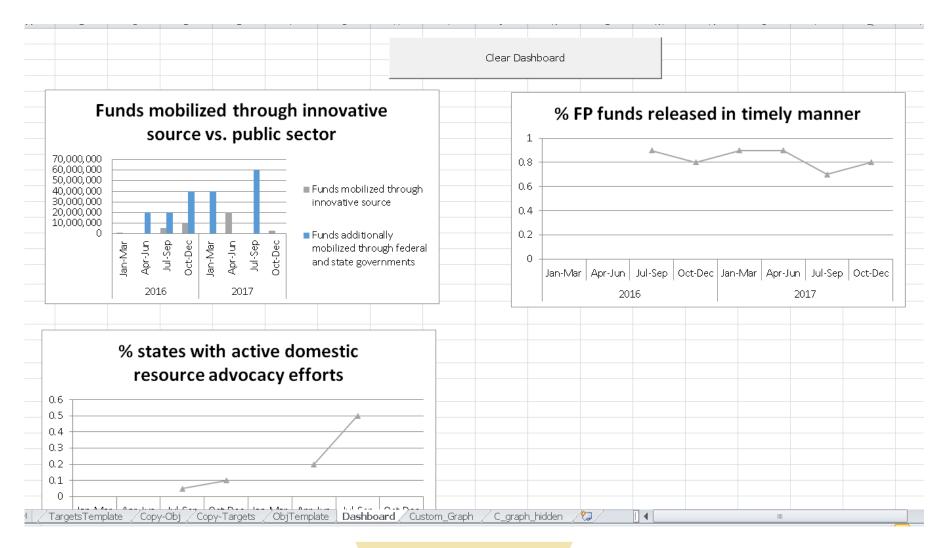
Excel Dashboard

Beta version

Refresh Dash	board			
		CIP Execution Status D	ashboard	
Beneficiary Values1	Women of Reproductive Age	Women of Reproductive Age	Youth	Youth
	S1. WRA are more knowledeable about and act on informed fertility	S2. WRA have improved access to	S3. Youth are more knowledgable about and act on informed fertility	S4. Youth have improved access to
	choice Men	affordable FP options	choice	affordable FP options
	S5 Men are more knowledgeable about and are accepting of FP.			
Enabling Bodies:	State & Federal	Government Providers Donors	Private Sector Community/Relig	gious Leaders
	Demand Generation-A	Service Delivery-B	Supply Chain-C	Policy & Environment-D
BeneficiaryProce sses	Increase the number of Nigerians that are provided with accurate information on contraceptive methods and where to access them Increase the number of religious and opinion leaders who support use of Family Planning	Increase the number of facilities providing high quality youth-friendly FP services Increase percentage of facilities (both public and private) which provide quality family planning services Ensure that health facilities have adequate number and category of trained staff according to national guidelines to provide LARC services	Strengthen forecasting, procurement, and logistics management capacity at all levels Ensure contraceptives are available at all service delivery points, including private sector, at all times	Increase the number of states that are implementing relevant FP/RH policies and guidelines, including FP CIPs Increase the number of policy makers and opinion leaders who realize the importance of FP
Financing	Mobilize new FP resources through innovative mechanisms including private sector	Increase funding for FP and ensure timely release of funds from federal and state budgets	Increase domestic resources for FP, both at federal and state government levels	
Monitoring	Increase the use of innovative mechanisms to improve data management at all levels of the healthcare delivery			
Management	Build capacity at all levels for FP programming and coordination			

Excel Dashboard





Execution: Key Takeaways

- Continuous and structured monitoring and measurement
- Prioritization, clarity, and accountability for who is doing what allows for streamlined execution
- Linkage from the activities, to intermediate objectives to the impact is critical
- CIP execution is an iterative process
- The process is meant to be flexible each country context is different!

What we know so far

- Ongoing technical assistance to MOH is critical
- Testing three degrees of assistance:

HIGH Assistance

Nigeria TSU

MEDIUM

Assistance

Pakistan



LOW

Assistance

Malawi





Better Policy for Better Health



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